

10/15/41462

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3	5		1			
4	2					
5	2					
6	2					
7	2					
8	2					
9	8					
10	2					
11	2					
12	1					
13	1					
14	1					
15	1					
16	5					
17	1					
18	1					
19	2					
20	2					
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TOTAL IND.			1			
TOTAL DEP.		22				
TOTAL CLAIMS		24				

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						